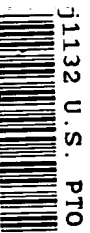


11/16/01



11/16/01 U.S. PTO

Atty. Dkt. No. 086142-0494

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



09/988048 U.S. PTO

Applicant: Hikaru KAMEYOSHI et al.

Title: SEAT BELT RETRACTOR

Appl. No.: Unassigned

Filing Date: Herewith

Examiner: Unassigned

Art Unit: Unassigned

UTILITY PATENT APPLICATION
TRANSMITTAL

Commissioner for Patents
Box PATENT APPLICATION
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

☐ Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

- ☒ Specification, Claim(s), and Abstract (18 pages).
- ☒ Informal drawings (6 sheets, Figures 1-9).
- ☒ Executed Declaration and Power of Attorney (4 pages).
- ☒ Assignment of the invention to TAKATA CORPORATION.
- ☒ Assignment Recordation Cover Sheet.
- ☒ Check in the amount of \$40.00 for Assignment recordation.
- ☐ Small Entity Statement.
- ☐ Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).

- ☒ Information Disclosure Statement.
- ☒ Form PTO-1449 with copies of 15 listed reference(s).
- ☐ Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

| | Claims as Filed | Included in Basic Fee | Extra Claims | Rate | Fee Totals |
|---|--------------------|--------------------------|-----------------|-------------------|---------------|
| Basic Fee | | | | \$740.00 | \$740.00 |
| Total Claims: | 11 | - 20 | = 0 | x \$18.00 | = \$0.00 |
| Independents: | 3 | - 3 | = 0 | x \$84.00 | = \$0.00 |
| If any Multiple Dependent Claim(s) present: | | | + | \$280.00 | = \$0.00 |
| | | | | SUBTOTAL: | = \$740.00 |
| <input type="checkbox"/> Small Entity Fees Apply (subtract 1/2 of above): | | | | | = \$0.00 |
| | | | | TOTAL FILING FEE: | = \$740.00 |

- ☒ A check in the amount of \$740.00 to cover the filing fee is enclosed.
- ☐ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 11/16/2001

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